

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: All Treatment Foster Care Case Management,

Residential Treatment Service Providers, Intensive In-Home Services and Managed Care Organizations Participating in the Virginia Medical Assistance

Programs

FROM: Patrick W. Finnerty, Director

Department of Medical Assistance Services

MEMO: Special

DATE: 12/14/2006

SUBJECT: Updates and Clarification of the Prior Authorization Process for Treatment Foster

Care Case Management, Residential Treatment Services, and Intensive In-Home

Services

The purpose of this memorandum is to provide periodic updates and clarification for the prior authorization (PA) process with Virginia Medicaid's PA contractor, Keystone Peer Review Organization (KePRO). This memorandum is one in a series of updates that will assist providers in obtaining PA-related information that will expedite the review process. We understand that some providers still are experiencing delays, however, we are seeing progress in the correct submission of Prior Authorizations by providers and in the number of PAs being processed by KePRO. We appreciate the provider input and suggestions given to us which have helped facilitate a greater understanding of providers' needs. We ask for your patience and understanding during this transition as we continue to improve upon the current process.

Timely Filing Requirements

Starting January 1, 2007, timely submission for requests will again be applied and determinations will be made based on timeliness. DMAS has extended the relaxed requirement of timely submission for PA requests through December 31, 2006. This applies for request dates beginning on the KePRO implementation date of your specific service provision.

New Developments from DMAS and KePRO

Prior Authorization Advisory Group

DMAS and KePRO have jointly worked together to develop a Prior Authorization Advisory Group (PAAG). The first meeting was held in Charlottesville on October 31, 2006.

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- The purpose of the PAAG is to provide a forum for providers in the healthcare community to give input on education and planning with KePRO.
- Members will disseminate information to their provider groups.
- Goals are to provide continual feedback on the transition and implementation processes; to develop an education plan for providers in regards to the PA process; and to have all providers using iEXCHANGE in order to expedite the PA process.
- The PAAG helps select appropriate topics for education, to include education on change methodologies and process redesign, to include best practices and the opportunity for process to share with each other their success and lessons learned in order to help each other in an efficient, cost effective manner.
- The PAAG member representatives are listed at the end of this memo. Providers may contact
 their respective representative to obtain or provide information appropriate to meet the goals
 of the PAAG.
- Meetings will be held three times per year.

Quarterly Newsletter from KePRO

KePRO has developed a newsletter, *Insider*, for providers to keep them up to date on various issues.

• The newsletter is available for review and downloading at the DMAS/KePRO website: http://dmas.kepro.org.

Helpful Submission Tips for Quickest Processing

- When submitting additional information on an open case, it is preferred that the additional information is submitted through the same media type as the initial request. For example, if you make an initial request through iEXCHANGE and need to submit additional information, it is preferred that you make the request to add information via iEXCHANGE. If the initial request is made via fax, then submitting additional information is preferred by fax.
- In addition to the total score for the scale, please provide the CAFAS/PECFAS specific item numbers for each impairment on the DMAS-365 (Residential Treatment Care Prior Authorization Request form) for Residential Treatment requests.
- For RTC and TFC-CM, please include DSM-IV codes, in addition to the narrative diagnoses when submitting requests.
- For Treatment Foster Care Case Management (TFC-CM) please provide specific descriptions of current behaviors (within the past 30-45 days) that support the CAFAS scores.
- Please use the DMAS 363 (Outpatient Prior Authorization Request) for Outpatient Psych requests.
- Use the DMAS 364 (Intensive In-Home and Treatment Foster Care-Case Management Preauthorization Request Form) for Intensive In-Home and Treatment Foster Care-Case Management requests.

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• Use the DMAS-365 (Residential Treatment Care Prior Authorization Request form) for Residential Treatment requests.

Information Regarding Pends

Pend is the general term used to indicated that the case has been received and is awaiting a decision, for any reason. A case detail line may be pended:

- 1. While it is in queue for clinical review.
- 2. Because it was submitted with insufficient information to complete the clinical review (An "Additional Information" letter will be sent to the provider).
- 3. While the case is being reviewed by a physician consultant.
 - If the detail line is pended due to #2 or #3, a note will be available for review in the "iEXCHANGE Additional Comments" section of the case explaining the cause.

The overall Case Status will continue to indicate "PEND" even if some of the detail lines are approved or denied. If any detail lines are left pended for any reason, the Case Status will remain "PEND"."

Resource Information

- All forms are located under "forms" on KePRO's website http://dmas.kepro.org or at www.dmas.virginia.gov/pr-prior authorization.htm.
- Should you have any questions regarding the prior authorization process, please send your inquiries via e-mail to providerissues@kepro.org or PAUR06@dmas.virginia.gov. Remember do not send PHI by e-mail unless it is sent via a secure encrypted e-mail submission.
- All other Medicaid provider issues not related to prior authorization should be addressed through the Provider Helpline. The numbers are 1-800-552-8627 or if you are located in Richmond or out-of-state call 804-786-6273.

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KePRO Contact Information

You may contact KePRO through the following methods:

iEXCHANGE: http://dmas.kepro.org/

Toll Free Phone: 1-888-VAPAUTH (1-888-827-

2884)

Local Phone: (804) 622-8900

Fax: 1-877-OKBYFAX (1-877-652-9329) **Mail:** 2810 N. Parham Road, Suite 305,

Richmond, VA 23294

Provider Issues: Provider Issues@kepro.org

DMAS and KePRO Website Resources

The following resources are available on the DMAS and KePRO websites:

- 1. iExchange Registration information
- 2. ICD9 diagnosis codes, outpatient rehab and home health revenue codes, and radiological scan procedure codes
- 3. Recent PA provider training presentations
- 4. Prior Medicaid Memos
- 5. PA Fax Request Forms and Instructions
- 6. PA Reference Guides
- 7. KePRO "Insider" Provider newsletter

Alternate Methods to Obtain PA, Eligibility and Claims Status Information

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is http://virginia.fhsc.com. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access prior authorization information including status via iEXCHANGE at http://dmas.kepro.org/.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the "DMAS Content Menu" column on the left-hand side of the DMAS web page for the "Provider Services" link, which takes you to the "Manuals, Memos and Communications" link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates that are requested.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at: www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

Prior Authorization Advisory Group

Purpose:

To provide a forum for providers in the healthcare community to give input on education and planning with the new Prior Authorization contractor, KePRO. In addition, this will benefit all providers as they can quickly and efficiently disseminate information to their members.

Goals:

- To provide continual feedback on the transition and implementation processes
- To develop an education plan for providers in regards to the Prior Authorization process
- Have all providers using iEXCHANGE in order to expedite the Prior Authorization process

Activities:

- Help select appropriate topics for education, to include education on change methodologies and process redesign
- Include best practices and the opportunity for providers to share with each other their successes and lessons learned in order to help each other in an efficient, cost effective manner

Membership:

<u>Inpatient – Med/Surg</u>

Scarlett Rucker, RHIT, LPN, CPUR, CCS Director of Health Information Management/ Utilization Management/Coding/Insurance Verification Twin County Regional Healthcare, Inc.

Mary S. Dias, Director Revenue Outcomes/Analysis Inova Health System

Patricia Steinbach, Director for Case Management and Utilization Review Carilion Medical Center

Holly Bradley-Carter, MT, BS (ASCP) PCAD Manager UVA Medical Center

Outpatient Psych

Terri A. Tuck, President Healthcare Administrative Services, LLC

DME

Lisa C. Westen, Supervisor, Intake and Billing Roberts Home Medical

Outpatient Rehab

Debbie Chapel, RN, CCM Case Manager Children's Hospital of the King's Daughters

Inpatient Psychiatric

Ruth Poignant, RN Adult Psych. Unit- M3 Virginia Baptist Hospital

NEOP

Amy Isakson, Marketing/Business Operations Manager UVA Imaging at Fontaine

Home Health

Marcia Tetterton, Executive Director Virginia Association for Home Care

Treatment Foster Care

Kim Folden, MSW, LCSW Roanoke/Lynchburg Unit Director/Therapist Braley & Thompson, Inc.

<u>Treatment Foster Care Case Management</u>

Patricia Morris-Howard, RNC Utilization Review Bridges Treatment Center

Waiver

Bonnie Gordon, RN, CEO & Administrator Family Care, Inc.